6TL08F2KTC

18-02657

WISCONSIN MOTOR VEHICLE CRASH REPORT

SAUK COUNTY SHERIFFS DEPARTMEN 1300 LANGE COURT BARABOO, WI 53913 (608) 356-4895

Crash Date 03/14/2018

Crash Time 07:25 AM

ſ	Document Number Override	Primary Crash Document #		Agency Crash Number		Investigating Officer/Deputy					
ļ				18-02657		DEPUTY T. SUTHERLAND			ID		
<u>၁</u>	Crash Date 03/14/2018	Crash Time 07:25 AM	Date Arriv	Date Arrived		Time	Arrived				
¥	Date Notified	Time Notified	Total Units	s			Injured	Total Killed	1		
F2	03/14/2018	07:28 AM	01			00		00			
6TL08F2KTC	On Emergency Hit and Run		Closure	losure Work Zone			Trailer or Towed		Reporting Threshold		
ETI	Government Property	School Bus Related NO		Tags	Tags						
	∨ Reportable	Crash Type NON-DOMESTICATED ANIMAL W/ NO INJU			RY A		Amended		Secondary Crash		
	I, a sworn law enforcement officer, agree that I have not added any CJIS data in this report.										
	Location										
	ON STH60 WB				Latitude Longitude						
	397 FT E OF HERBRAND RD				43.228084054		-89.869147885		147885		
	IN THE TOWN OF TROY IN SAUK COUNTY				X Coordinate 267001.1875				Y Coordinate 4790141		
	IN SAUK COUNT			•	Structure Type NO STRUCTURE						
1	Crack Soons										
,	Crash Scene										
	First Harmful Event	AAL (ALIVE)			First Harmful Event Location ON ROADWAY						
	NON DOMESTICATED ANIN Manner of Collision	MAL (ALIVE)									
	NO COLLISION W/VEHICLE IN TRANSPORT				Light Condition						
-	Road Surface Condition(s)	THE THAIRDI ON			Roadway F	Factor(s)					
	rieda Gariaco Gerialien (e)				Troduway Factor(5)						
	Environment Factor(s)										
	Weather Condition(s)										
	(-)										
	Animal Type				Relation To Trafficway						
	DEER				TRAFFICWAY - ON ROAD						
	Crash Classification - Location PUBLIC PROPERTY			Crash Classification - Juris NO SPECIAL JURISD							
	Tribal Land			Access Control		SDICTION		Special Study			
	Thou Land			7100033 GOILLOI				opoolal olddy			
L	Init Cummony										
_	Unit Summary Unit Status		Vehicle Operation	na As Cl	assification		Unit Type				
	IN TRANSIT D CLASS				TRUCK						
-	Vehicle Type				Operating As Endorsements						
01	UTILITY TRUCK/PICKUP TRUCK										
•	Total Occs Train/Bus # Injured		Total # Citations Issued			Total Trailers		Total HazMat Types			
	1		0			0					
	Insurance? YES	Direction Of Travel WESTBOUND	Pre CrashTire Mark		Speed Lim	eed Limit Total Lan		es			
LINO	Most Harmful Event: Collision Wit	Special Function			Emergency Motor		cle Use				
	NON DOMESTICATED ANIN	NO SPECIAL FUNCTION		TION							
ŀ	Traffic Way	Traffic Control			Traffic Control Inoperative/Missing		tive/Missing				
	Surface Type	Road Curvature			Road Grade						
	(Ī				

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	Truc NO	k Bus or HazMat							
		Vehicle							
		License Plate Number Plate Type St Country of Issuance							
		559769	LTK - LIGHT TRUCK	WI	UNITED STATES				
٤		Vehicle Identification Number	Make	Year	Model				
	5	1FTRX18W42NA56711	FORD	2002	NO DATA FO				
		Color	Body Style	2002	Bus Use				
		SIL - SILVER (ALUMINUM)	2D - 2DR		NOT A BUS				
LIND	ш	Initial Contact Point	Vehicle Damage						
	긎	12FRONT							
	¥	Extent Of Damage	12FRONT	-FRONT					
	VEHICL	MINOR DAMAGE							
		Towed Due To Damage	Vehicle Removed By	ehicle Removed By					
		NOT TOWED							
		What Driver Was Doing	Vehicle Factors						
		3							
		Driver Prior Action Other							
		Driver Actions							
	ш	NO CONTRIBUTING ACTION							
\vdash	VEHICLE								
LIND	Ĭ								
ر	回								
		Driver Distractions							
		NOT DISTRACTED							
_	_								
5	9								
		Owner Name	Owner Address	Owner Address					
_	ı	Policy Holder							
Ĭ		Insurance Company	Individual						
\supset		PROGRESSIVE-ADVANCED-INSURANCE-CO	ROBERT ARNOLD	ROBERT ARNOLD					
	1	Individual							
		Driver	Citations Issued		Sex				
	_	ROBERT ARNOLD	0 Date of Birth		MALE				
	INDIVIDUAL	(608) 963-8326			Race				
_			10/04/1963		WHITE				
LNO	≥	Address	Driver License Number						
\supset	ቯ	519 7TH AVE	A6547726336409						
	=	BARABOO, WI 53913 , US	STATE: WISCONSIN	STATE: WISCONSIN COUNTRY: UNITED STATES					
		On Duty Crash	Safety Equipment	Safety Equipment					
		Equipment		SHOULDER & LAP BELT					
		Seat Position	SHOULDER & LAP BE						
		Helmet Use	Helmet Compliance	Helmet Compliance					
		Eve Protection	Tint Compliance						

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i										
01	00	Injury	Injury Severity NO APPARENT	INJURY	Airbag					
		Ejected			Ejection Path		Trapped/Extricated			
		Medical Transport NOT TRANSPOR	TED		EMS Agency Identifier		EMS Run #			
		Hospital			Date of Death		Time of Death			
		Non Motorist	Striking Unit #	Prior Action		Location		To/From School		
		Action	•	- 1		•				
_	NAL									
UNIT	INDIVIDUAL									
	S									
		A :: 0:1								
		Action Other								
	L	Drug & Alcohol Suspected Alcohol Use NO			Suspected Drug Use NO					
		Alcohol Test Given TEST NOT GIVEN			Alcohol Test Type		Alcohol Test Results			
		Drug Test Given TEST NOT GIVEN			Drug Test Type		Drug Test Results			
01	00	Drug Type								
		Individual Condition								
	APPEARED NORMAL									